

### ***Caution: DRAFT FORM***

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site ([www.irs.ustreas.gov](http://www.irs.ustreas.gov)).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

2000

Department of the Treasury  
Internal Revenue Service

▶ See instructions on pages 2 through 4.

For calendar year 2000 or short year beginning , 2000, and ending , 2000.

**Part I** General Information

1	Name of trust or other entity filing return	2	Employer identification number
3a	Name and title of trustee		
3b	Number, street, and room or suite no. (If a P.O. box, see the instructions.)		
3c	City or town, state, and ZIP code	4	Number of QFTs included on this return
5	Check applicable boxes: <input type="checkbox"/> Initial return <input type="checkbox"/> Amended return <input type="checkbox"/> Final return <input type="checkbox"/> Change in fiduciary's name <input type="checkbox"/> Change in fiduciary's address		

**Part II** Tax Computation

Income	1	Interest income	1		
	2	Ordinary dividends	2		
	3	Capital gain or (loss) (attach Schedule D (Form 1041))	3		
	4	Other income. List type and amount	4		
	5	Total income. Combine lines 1 through 4	5		
Deductions	6	Taxes	6		
	7	Trustee fees	7		
	8	Attorney, accountant, and return preparer fees	8		
	9	Other deductions <b>not</b> subject to the 2% floor	9		
	10	Allowable miscellaneous itemized deductions subject to the 2% floor	10		
	11	Total deductions. Add lines 6 through 10	11		
Tax and Payments	12	Taxable income. Subtract line 11 from line 5	12		
	13	Tax from: <input type="checkbox"/> Tax Rate Schedule <input type="checkbox"/> Schedule D (Form 1041) <input type="checkbox"/> Composite return	13		
	14	Credits (see instructions). Specify the credits claimed	14		
	15	Net tax. Subtract line 14 from line 13 (see instructions)	15		
	16	Payments (see instructions)	16		
	17	Tax due. If line 16 is <b>smaller</b> than line 15, enter amount owed	17		
	18	Overpayment. If line 16 is <b>larger</b> than line 15, enter amount overpaid	18		
	19	Amount of line 18 to be: <b>a</b> Credited to 2001 estimated tax <b>b</b> Refunded	19		

**Please  
Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than trustee) is based on all information of which preparer has any knowledge.

▶ Signature of trustee or officer representing trustee    ▶ Date

**Paid  
Preparer's  
Use Only**

Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code	EIN	Phone no. ( )	